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}	s	ubstitute for For	m PTO-875					0/105	7.61
	CLAIMS AS FI		(Column 2)		SMALL I	ENTITY	OR	OTH SMAL	ER THAN LL ENTITY
FOR BASIC FEE	NUMBER F	LEO N	NMBER EXTRA		ATE	FEE	7		
(37 CFR 1.16(a))							4	RATE	FEE
TOTAL CLAIMS (37 CFR 1.16(c))				┦ ├──		-	OR		
INDEPENDENT CLAIMS		us 20 = -		_ × 5_	<u>-</u> -		OR	X \$=	
· · · · · · · · · · · · · · · · · · ·		vs 3 = .		X <u> </u>			OR	x s=	
MULTIPLE DEPENDENT	CLAIM PRESENT	(37 CFR 1.16(c	0)	_	=		OR	+ -	
" If the difference in column 1 is less than zero, enter "O" in column, 2.					TAL		OR	TOTAL	
CLA	IMS AS AMEND	ED - PART II					•		`L
HINE	(Column 1)	(Column	2) (Caluṛnn 3)	SA	AALL EI	NTITY	OR	OTHE	R THAN
5 12/11/25	CLAIMS REMAINING	HIGHEST NUMBER		<i>]</i> [$\neg \neg$		ì.	SMALL	ENTITY
Total (3) CFR 1.15(c) Independent (3) CFR 1.15(p)	AFIER MENDMENT	PREVIOUS	Y EXTRA	RA	-	ADDI- TIONAL		RATE	ADDI- TIONAL
Total (37 CFA 1.16(cf)	3 Min		-			FEE			FEE
Z Independent :	Minu	5 3	1:	× 1	7		OR	X Z	
FIRST PRESENTATIO	N OF MULTIPLE DEPE			× 1			OR	X 5=	
	OF MOLTIFLE DEPE	ADENT CLAIM (37	CFR 1.16(d))	1 1	<u>-</u>	\rightarrow	OR	+ 5=	
AFR				TOTAL ADO'L F	EE _		ON:	TOTAL ADD'L FEE	
	Olumn 1)	(Column 2	(Column 3)					-	
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Z / O O O AMI	ENDMENT	PREVIOUSLY PAID FOR	EXTRA	1		IONAL FEE	- 1	RATE	ADDI: TIONAL
5 (1)7 CFR 1.10(c))	3 Minus	20			1	FEE	<u> </u>		FEE
Total (17 cra 1.14(c)) Independent (17 cra 1.14(c))	Minus	2	1 -	× s	+		OR -	× 1=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						\leftarrow	OR _	× \$=	
	S. M. CE DEPER	ZENT CLAM (37C	FR 1.16(d))	+3TOTAL	<u> </u>	\sim		+ 5	
		•		ADD'L FE	e L			OTAL ADD'L FEE	
	umo 1)	(Column 2)	(Column 3)					<u> </u>	
l oca	AIMS IAINING	HIGHEST NUMBER	PRESENT	RATE	Τ.				
AMEN	TER OMENT	PREVIOUSLY.	EXTRA	RAIL		DDH-	ŀ	RATE	ADDI- TIONAL
Total (37 CFR 1.15(cj)	Minus	**	=			EE	-		FEE
Independent - (37 CFR 1,18(b))	Minus		2	× 5			OR X		
Total (37 CFR 1.18(1)) Independent (37 CFR 1.18(b)) FIRST PRESENTATION O	F MUI TIPLE DESCRIPT			x ss	+	<u> </u>	OR X	s=	
		NI CLAIM (37 CFI	R 1,16(d))	+3			DR· +	3=	
If the anky is set				TOTAL ADD1 FEE		7,		OTAL OD'L FEE	
If the entry in column 1 if If the "Highest Number if If the "Highest Number P					<u> </u>	`	AL	- L	
If the 'Highest Number P The 'Highest Number Pr			less than 3, enter						

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completer application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.